PTO/SB/17 (07-06)
Approved for use through 01/31/2007 OMB 0651-0032
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
this a collection of information under it distributes a unifie OMB control number.

Under the Paperwork R	eduction Act of 1995	, no person are required t			rk Office, U.S. DE n unless if display			
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
			Application Nur		0/719,659-Co	onf. #2380		
FEE TRANSMITTAL			Filing Date	_ N	November 20, 2003			
For FY 2006			First Named In		Tamir Ben-David			
FOFF1 2006			Examiner Name	. N	M. Bockelman			
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 120.00			Art Unit 3766				_	
TOTAL AMOUNT OF P	Attorney Docket No. 06727/100J782-US4							
METHOD OF PAYM	ENT (check all t	hat apply)						
x Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number 04-0100 Deposit Account Name Darby & Darby P.C.								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
x Charge any auditional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION					_			
1. BASIC FILING, SEAF		INATION FEES	_					
			ARCH FEES	EXAMINA	ATION FEES			
Application Type		Small Entity Fee (\$) Fee (Small Entity	Fee (\$)	Small Entity	Fees P	-: (e)	
Utility	Fee (\$) 300	Fee (\$) Fee (200	Fee (\$)	Fees P	110 (\$)	
•	200	100 100		130	65			
Design								
Plant	200	100 300		160	80			
Reissue	300	150 500		600	300			
Provisional	200	100 0	0	0	0			
2. EXCESS CLAIM FEE	S						Fee (\$)	
Fee Description						Fee (\$)		
Each claim over 20 (including Reissues)						50	25	
Each independent claim over 3 (including Reissucs)						200	100	
Multiple dependent class						360	180	
Total Claims Extra Claims Fee (\$) Fee F			Paid (\$) Multiple Dependent					
HP = highest number of total	closes said for if a	ontor then 30		Fee	(\$)	Fee Paid (\$)		
-			Paid (\$)				-	
indep. Claims Ex	ra Ciairis _ r	ee (3) FCC	raid (3)					
HP = highest number of inde	pendent claims paid	for, if greater than 3						
3. APPLICATION SIZE	FFF						-	
If the specification and		d 100 sheets of paper	(excluding electr	onically file	d sequence or	computer		
		application size fee d		for small ent	ity) for each a	dditional 50		
sheets or fraction th	creof. Sec 35 U	S.C. 41(a)(1)(G) and	137 CFR 1.16(s).					
Total Sheets	Extra Sheets		additiona <u>l 50 or fra</u>			Fee P	aid (\$)	
- 100 =		/50	(round up to a wh	ole number) x				
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification. \$130 fee (no small entity discount) Other (e.g., late filling supekarge): 1251 Extension for response within first month 120.00								
	sureharge): 12	DIEXIENSION for re	sponse within ti	rst month		120	7.00	
SUBMITTED BY	11/19/		Registration No.					
Signature	Rex	<u></u>	(Attorney/Agent)	25,351	Telephone	(212) 527-7770		
Name (Print/Type) S. Pet	er∕Ludwig ∕				Date	March 6,	2007	